FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL								
OMB Number:	3235-0287							
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Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

1. Name and Address of Reporting Person * Sledge Samuel D					2. Issuer Name and Ticker or Trading Symbol ProPetro Holding Corp. [PUMP]										5. Relationship of Reporting Person(s) to Issu (Check all applicable) Director 10%				vner
(Last) 1706 S. MID	(First)	(/)	fiddle)	3. Date of Earliest Transaction (Month/Day/Year) 04/18/2021									X	Officer (g below)	other (specify below) President			specify	
(Street) MIDLAND (City)	TX (State		9701 (ip)	4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Indiv	vidual or Joint/Group Filing (Check Applicable Line) Form filed by One Reporting Person Form filed by More than One Reporting Person					
		T	able I - No	n-Deri	vativ	e S	ecuriti	es Acq	uired,	Disp	osed o	f, or E	Benefic	cially Ow	ned				
1. Title of Security (Instr. 3)				2. Transaction Date (Month/Day/Year)			2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transaction Code (Instr. 8)		ities Acquired (A) or d Of (D) (Instr. 3, 4 and 5)			5. Amount of Securities Beneficially Owned Following Reported Transaction(s)		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)	
					Code	v	Amount	Amount (A) or (D)		Price	(Instr. 3 and				(111501.4)				
Common Stock					/18/2021				М		1,638(1)		Α	(2)	3,049			D	
Common Stock 04				04/18	18/2021				F		399 ⁽³⁾		D	\$10.07	2,650			D	
	Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																		
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security		3A. Deemed Execution Dat if any (Month/Day/Y	te, Tr	Code (Instr.		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisable and Expiration Date (Month/Day/Year)			Securi			Derivative	9. Number derivative Securities Beneficia Owned Following Reported Transacti	e s ally g	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)
				Co	ode	v	(A) (E	(D)	Date Exercisal	Date Exercisable C		Title		Amount or Number of Shares		(Instr. 4)	ion(a)		
Restricted Stock Units	(2)	04/18/2021			М	Л 1,638		1,638	(4)		(4)		nmon ock	1,638	\$0	56,34	10	D	

Explanation of Responses:

- 1. Reflects shares of common stock of the Issuer ("Common Stock") granted upon vesting and settlement of previously awarded restricted stock units ("RSUs").
- 2. Each RSU represents a contingent right to receive either one share of Common Stock or an amount of cash equal to the fair market value of one share of Common Stock.
- 3. Reflects shares of Common Stock withheld to satisfy taxes payable in connection with the vesting and settlement of previously awarded RSUs.
- 4. On April 18, 2018, the reporting person was granted 4,913 RSUs, vesting in three substantially equal annual installments beginning on the first anniversary of the grant date.

/s/ Newton W. Wilson III, as attorney-in-fact for Samuel D. 04/20/2021 Sledge

** Signature of Reporting Person Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

- * If the form is filed by more than one reporting person, see Instruction 4 (b)(v).
- ** Intentional misstatements or omissions of facts constitute Federal Criminal Violations See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

 $Note: File \ three \ copies \ of \ this \ Form, \ one \ of \ which \ must \ be \ manually \ signed. \ If \ space \ is \ insufficient, \ see \ Instruction \ 6 \ for \ procedure.$

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB Number.